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FAX NO. 408 738 0881

P. 03

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Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
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CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

28112 7590 12/18/2003
GEORGE O. SAILE & ASSOCIATES
28 DAVIS AVENUE
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(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/055,094	01/23/2002	Il Kwon Shim	ST01-006	8095

TITLE OF INVENTION: HEAT SPREADER ANCHORING & GROUNDING METHOD & THERMALLY ENHANCED PBGA PACKAGE USING THE SAME

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	03/18/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
ESTRADA, MICHELLE	2823	438-108000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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2 _____
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ST ASSEMBLY TEST SERVICES LTD

Singapore, Singapore

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee☐ Advance Order - # of Copies _____

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☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number 50-0372 (enclose an extra copy of this form).

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(Authorized Signature)

Mikio Ishimaru (Date) 3/18/04
Mikio Ishimaru Reg. # 27,449

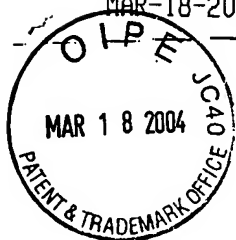
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03/19/2004 AWONDAF2 00000057 500374 10055094

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The Law Offices of Mikio Ishimaru

Intellectual Property Law
Patents - Licensing - Strategy - & Related Matters
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Fax

To:	Mail Stop Issue Fee	From:	Mikio Ishimaru
Fax:	(703) 746-4000	Pages:	5, including this page
Phone:	(703) 305-8283	Date:	March 18, 2004
Re:	U.S. Patent Application Serial No. CC: 10/055,094		

☒ Issue Fee and Fee Address ☐ Information ☐ Other

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Dear Sir/Madam:

Attached are a Certificate of Transmission, Fee Address Form, and Issue Fee Transmittal for U.S. Patent Application Serial No. 10/055,094 (attorney docket no. 27-026).

Respectfully submitted,

Mikio Ishimaru
Reg. No. 27,449



PTO/SB/97 (08-03)

Approved for use through 7/31/2006. OMB 0651-0031

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on March 18, 2004
Date

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Tamara Tucker

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With reference to serial number 10/055,094, the following are being submitted:

Fax Cover Sheet
Certificate of Transmission
Issue Fee Transmittal
Fee Address Form

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